

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>10/30/00</i>
O.I.P.E. CLASSIFIER		<i>4452</i>	
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS **BEST AVAILABLE COPY**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/21/02
2	✓	✓	4/27/02
3	✓	✓	3/27/03
4	✓	✓	9/25/01
5	✓	✓	
6	0	0	0
7	✓	✓	✓
8	✓	✓	✓
9	0	0	0
10	0	0	0
11	✓	✓	✓
12	✓	0	0
13	✓	✓	✓
14	✓	✓	✓
15	✓	✓	✓
16	✓	✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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